

FILE NOW: FILING FEE AFTER MAY 1 IS \$20.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF
STATE
SUNSHINE
DIVISION OF CORPORATIONS

DOCUMENT # P93000052392 (6)

1. Corporation Name

JAY BAKER, M.D., P.A.

Principal Place of Business

9980 CENTRAL PARK BLVD N
STE 304
BOCA RATON FL 33428

Mail Address

9980 CENTRAL PARK BLVD N
STE 304
BOCA RATON FL 33428

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt., Etc.

26 Suite, Apt., Etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

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9. Name and Address of Current Registered Agent

BAKER, JAY MD
9980 CENTRAL PARK BLVD N
STE. 304
BOCA RATON FL 33428

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Section 607, Florida Statutes, I, the undersigned, hereby make known and warrant the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Each change is made by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, the provisions of Florida Statutes.

SIGNATURE

12.

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

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CITY-STATE-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIR

J. Baker

4/12/96

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483 8335

CR2E034 (12/95)